

Sorted by Element Name

	Suggested Medical Data Elements for WCIS Sorted by Data Element Name
DN	DATA ELEMENT NAME
513	ADMISSION DATE
535	ADMITTING DIAGNOSIS CODE
544	BILL ADJUSTMENT REASON CODE
508	BILL SUBMISSION REASON CODE
629	BILLING PROVIDER FEIN
528	BILLING PROVIDER LAST/GROUP NAME
542	BILLING PROVIDER POSTAL CODE
537	BILLING PROVIDER PRIMARY SPECIALTY CODE
630	BILLING PROVIDER STATE LICENSE NUMBER
15	CLAIM ADMINISTRATOR CLAIM NUMBER
187	CLAIM ADMINISTRATOR FEIN
14	CLAIM ADMINISTRATOR MAILING POSTAL CODE
188	CLAIM ADMINISTRATOR NAME
512	DATE INSURER PAID BILL
511	DATE INSURER RECEIVED BILL
510	DATE OF BILL
31	DATE OF INJURY
557	DIAGNOSIS POINTER
514	DISCHARGE DATE
518	DRG CODE
504	FACILITY CODE
679	FACILITY FEIN
681	FACILITY MEDICARE NUMBER
678	FACILITY NAME
688	FACILITY POSTAL CODE
680	FACILITY STATE LICENSE NUMBER
534	GATEKEEPER INDICATOR
737	HCPCS BILL PROCEDURE CODE
726	HCPCS LINE PROCEDURE PAID CODE
717	HCPCS MODIFIER BILLED CODE
727	HCPCS MODIFIER PAID CODE
626	HCPCS PRINCIPLE PROCEDURE BILLED CODE
522	ICD-9 CM DIAGNOSIS CODE
624	INITIAL AMOUNT PAID
5	JURISDICTION CLAIM NUMBER
718	JURISDICTION MODIFIER BILLED CODE
730	JURISDICTION MODIFIER PAID CODE
715	JURISDICTION PROCEDURE BILLED CODE
729	JURISDICTION PROCEDURE PAID CODE
547	LINE NUMBER
704	MANAGED CARE ORGANIZATION FEIN
208	MANAGED CARE ORGANIZATION IDENTIFICATION NUMBER
209	MANAGED CARE ORGANIZATION NAME
712	MANAGED CARE ORGANIZATION POSTAL CODE
600	PLACE OF SERVICE LINE CODE
521	PRINCIPLE DIAGNOSIS CODE
524	PROCEDURE DATE
507	PROVIDER AGREEMENT CODE
642	RENDERING BILL PROVIDER FEIN
638	RENDERING BILL PROVIDER LAST/GROUP NAME
651	RENDERING BILL PROVIDER PRIMARY SPECIALTY CODE
649	RENDERING BILL PROVIDER SPECIALTY LICENSE NUMBER
643	RENDERING BILL PROVIDER STATE LICENSE NUMBER
586	RENDERING LINE PROVIDER FEIN

Sorted by Element Name

589	RENDERING LINE PROVIDER LAST/GROUP NAME
595	RENDERING LINE PROVIDER PRIMARY SPECIALTY CODE
599	RENDERING LINE PROVIDER STATE LICENSE NUMBER
732	SERVICE ADJUSTMENT REASON CODE
509	SERVICE BILL DATE(S) RANGE
516	TOTAL AMOUNT PAID PER BILL
574	TOTAL AMOUNT PAID PER LINE
501	TOTAL CHARGE PER BILL
552	TOTAL CHARGE PER LINE
	PHARMACY BENEFIT CODES
564	BASIS OF COST DETERMINATION
502	BILLING TYPE CODE - DN502
567	DME BILLING FREQUENCY CODE
563	DRUG NAME
572	DRUGS/SUPPLIES BILLED AMOUNT
579	DRUGS/SUPPLIES DISPENSING FEE
571	DRUGS/SUPPLIES NUMBER OF DAYS
570	DRUGS/SUPPLIES QUANTITY PURCHASED
721	NDC BILLED CODE
728	NDC PAID CODE
527	PRESCRIPTION BILL DATE
604	PRESCRIPTION LINE DATE
561	PRESCRIPTION LINE NUMBER
566	TOTAL CHARGE PER LINE - PURCHASE
565	TOTAL CHARGE PER LINE - RENTAL